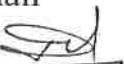


Notice of Inquiry

In accordance with Article 17 of the current labor contract this notice of inquiry is being issued.

Date: 03-19-2007

To: David Cimperman

From: Chief Urban 

The attached list is the sick leave usage from April 2006 to present.

April 17, 2006 in association with days off.

~~July 14, 2006 In association with days off.~~

~~July 18 to 26th, 2006 In association with comp. and days off:~~

~~October 8 & 9, 2006~~

~~November 18,19,20, 2006~~

~~January 6,7,8, 2007~~

~~January 16, 17, 2007 in conjunction with comp. and days off.~~

~~March 18, 2007 in conjunction with comp. and vacation.~~

Apparent violations of the sick leave abuse and the sick leave occasion policy.

Apparent violations of the Standards of conduct including the following:

4- Maintaining an Acceptable Level of availability for work..

13 Establishing pattern of Absenteeism

17 Knowing and Observing all Directives, Rules, Policies and Procedures.

You are notified that violations could result in a written reprimand.

Verbal Rep. To date - 5/1/07

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To: Chief Jeff Urban

March 18, 2007

Fr: Capt. Sheldon DeMattio

Re: Officer Dave Cimperman

On March 18th Officer Cimperman reported off for Day Shift with a bad neck. This would be his 7th occasion. This day was also in conjunction with Vacation. The other dates are: April 17th, - 00 . July 14th, October 8th & 9th, November 18th, 19th & 20th, January 6th, 7th & 8th and January 16th & 17th. April 17th, July 14th, January 16th & 17th and March 18th are in conjunction with vacation, comp and/or days off. C-1 OFF C.O.

7-000-6,7,8

July 18 - 26
C-1 OFF

Capt. DeMatt
Capt. Sheldon DeMattio

TO: Chief Jeff Urban

FR: Capt. Sheldon DeMattio

RE: Officer Dave Cimperman

On July 19th Officer Cimperman reported off for day shift sick.



Capt. Sheldon DeMattio

CITY OF NEW PHILADELPHIA
DEPARTMENT: POLICE

APPLICATION FOR VACATION, PERSONAL DAYS, COMP-TIME,
BIRTHDAY, SICK LEAVE, INJURY LEAVE

NAME: D. C. [signature] DATE: 7/19/07

ADDRESS: _____ TITLE: _____

TIME OF SUBMISSION: _____

I HEREBY APPLY FOR 6 WORK HOURS OF VACATION, PERSONAL TIME,

SICK LEAVE, COMP-TIME, BIRTHDAY, FUNERAL, INJURY LEAVE. (CIRCLE ONE)

FROM: 6a 7/19, 2007 TO: 2p 7/19, 2007. INCLUSIVE

SIGNATURE OF EMPLOYEE: D. [signature]

I HEREBY STATE _____, 20____ IS THE ANNIVERSARY OF MY BIRTHDAY
AND HAVE/HAVE NOT MARKED THE ABOVE DAY AS REQUESTED DAY OF LEAVE.

VACATION

COMP-TIME

ANNIVERSARY DATE: _____	COMP-TIME CREDIT: _____	Hrs
VACATION CREDIT: _____	AMOUNT REQUESTED: _____	Hrs
AMOUNT REQUESTED: _____	BALANCE DUE: _____	Hrs
BALANCE DUE: _____		

PERSONAL TIME

SICK / INJURY LEAVE

PERSONAL CREDIT: _____	AMOUNT REQUESTED: <u>8 HRS</u>
AMOUNT REQUESTED: _____	ILLNESS: <u>neck pain</u>
BALANCE DUE: _____	

APPROVED _____ DENIED _____
DEPARTMENT HEAD _____

Sick

City of New Philadelphia
Police Department

PE
423-06

Application for Vacation, Personal, Compensatory,
Birthday, Funeral and Sick Time

Employee Name: D. Curren Date: 4/17/06

Address: _____ Title: _____

Time: _____

I hereby apply for 4 Work ~~Hours~~ of: Vacation, Personal Time, Sick
Leave, Comp-Time, Birthday, Funeral Or Injury Leave Time Off.
(Circle One)

From: 100 4/17, 2006 To: 2 p. 4/17, 2006 (INCLUSIVE)

Employee Signature: [Signature]

I hereby state that _____, 2006 is the anniversary of my birthday
and I have/have not marked the above day as a requested day off.
(circle one)

Vacation

Comp-Time

Vacation Credit: _____
Amount Requested: _____
Balance Due: _____

Comp-Time Credit: _____
Amount Requested: _____
Balance Due: _____

Personal Time

Sick Leave:

Personal Credit: _____
Amount Requested: _____
Balance Due: _____

Amount Requested: 4 HRS
Illness: FLU ??

Approved: [Signature] Denied: _____ Chief: [Signature]
03-16-05 ju